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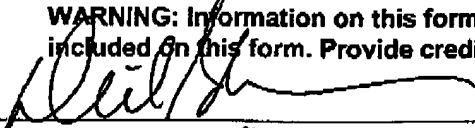
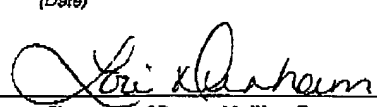
To: Examiner Joseph D. Anthony, Art Unit 1714
Of: U.S. Patent and Trademark Office
From: Rosenbaum & Associates, P.C.
Client/Matter: 6104-001
Date: Thursday, December 8, 2005

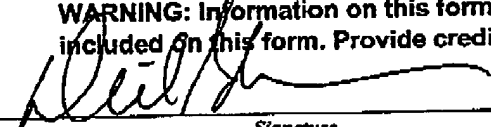
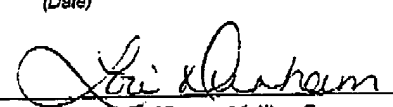
DOCUMENTS	NUMBER OF PAGES
Transmittal document	1
Request for Continued Examination (RCE)	1
Copy: Amendment After Final filed 9/9/05	18
Amendment Transmittal (1 page in duplicate)	2
Preliminary Amendment	8
Petition for Extension of Time	1
TOTAL	31

COMMENTS: In Re: U.S. Serial No. 10/784,842
Applicant: A. Mora-Gutierrez, et al.
Attorney Docket No. 6104-001

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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. 6037-006	
Applicant(s): A. Mora-Gutierrez, et al.						
Application No. 10/784,842	Filing Date 2/23/04	Examiner Joseph D. Anthony	Customer No. 29,335	Group Art Unit 1714	Confirmation No. 1473	
Invention: ANTIOXIDANT COMPOSITIONS AND METHODS OF USE THEREOF						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	33 -	43 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 18-2000 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">  _____ <i>Signature</i> David G. Rosenbaum (Reg. No. 31,872) ROSENBAUM & ASSOCIATES, P.C. 650 Dundee Road Suite #380 Northbrook, IL 60062 Tel: (847) 770-6000 Fax: (847) 770-6006 </div> <div style="width: 50%;"> Dated: December 8, 2005 <i>Certificate of Facsimile Transmission</i> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on December 8, 2005 to (571) 273-8300 _____ (Date)  _____ <i>Signature of Person Mailing Correspondence</i> Lori Dunham _____ <i>Typed or Printed Name of Person Mailing Correspondence</i> </div> </div>						
cc:						

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